MNST COMPLETE THIS SECTION ON FLIVERY Case 2:05-cv-SENDER: COMPLETE THIS SECTION 1 A. Signature ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse Beceived by (Printed Name so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below: 1. Article Addressed to: lallallaralllaralulallal City of Montgomery City Clerk 3. Service Type

Chartified Mail 103 Perry Street Express Mail Montgomery, Al 36104 Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ C.O.D. **X**Yes 4. Restricted Delivery? (Extra Fee) 7005 0390 0000 5265 0295 2. Article Number

(Transfer from service label)
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540